

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 701826-054340-US
In re Application of R. Lemieux et al.		
Application Number 10/643,743	Filed August 19, 2003	
For PURIFICATION OF POLYREACTIVE AUTOANTIBODIES AND USES THEREOF		
Group Art Unit 1645	Examiner Schwadron, Ronald B.	
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 80%;"> <p><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)</p> <p><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$230/\$460)</p> <p><input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$525/\$1050)</p> <p><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$820/\$1640)</p> <p><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1115/\$2230)</p> <p><input checked="" type="checkbox"/> Three months (\$525) – two months (\$230 paid 4/9/2008)</p> </div> <div style="width: 15%; text-align: right; vertical-align: bottom;"> <p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p> <p>\$ 295.00</p> </div> </div> <p><input checked="" type="checkbox"/> Applicant claims small entity status.</p> <p><input type="checkbox"/> A check to cover the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0850</u>. I have enclosed a duplicate copy of this sheet.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p style="margin-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record.</p> <p style="margin-left: 40px;"><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <p><u>/Stephen R. Duly/</u></p> <p style="text-align: center;">Signature</p> </div> <div style="width: 45%;"> <p><u>May 13, 2008</u></p> <p style="text-align: center;">Date</p> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <p><u>David S. Resnick (34,235) / Stephen R. Duly (56,183)</u></p> <p>Typed or printed name</p> </div> <div style="width: 45%;"> <p><u>(617) 345-6057 / 1270</u></p> <p>Telephone Number</p> </div> </div>		
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>		